					002(4)(0)
ATTORNEY (Name, state bar number, and address):			F	OR COURT USE ONLY	
-					
TELEPHONE NO.: FAX NO	.:				
ATTORNEY FOR (Name):					
Insert name of court and name of judicial district and br	anch court, if any:				
DI ANTIEE			-		
PLAINTIFF:					
DEFENDANT:					
REQUEST FOR ENTRY OF DEFAU (Application) COURT JUDGMEN		JDGMENT	CASE NUMBER:		
4 TO THE OLEDIA On the complete or come	man laint file d		•		
 TO THE CLERK: On the complaint or cross-co a. on (date): 	mpiaint nied				
b. by (name):					
c. Enter default of defendant (names):					
	(0) 11 5	505(1) () (
d. I request a court judgment under Code clerk for a hearing date, unless the co					
e. Enter clerk's judgment	in will office a jaaginone	on an amaavit ai	ider code or o	ivii i roccaare see	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(1) for restitution of the premises	only and issue a writ of	execution on the	iudament. Cod	de of Civil Proced	ure section
1174(c) does not apply. (Code			,g		
	all tenants, subtenants, Right to Possession was				
(2) under Code of Civil Procedur reverse (item 5).)	e section 585(a). (Comp	lete the declarati	on under Code	: Civ. Proc., § 585	5.5 on the
(3) for default previously entered	on (date):				
2. Judgment to be entered	Amount	Credits ack	nowledged	<u>Bala</u>	<u>nce</u>
a. Demand of complaint\$		\$		\$	
b. Statement of damages *		_		_	
(1) Special\$		\$		\$	
(2) General		\$ \$		\$ ¢	
d. Costs (see reverse)		\$		\$ \$	
e. Attorney fees \$		\$		\$	
f. TOTALS \$		\$		\$	
g. Daily damages were demanded in complai	nt at the rate of: \$	per o	lay beginning (date):	
(* Personal injury or wrongful death actions only					
3. (Check if filed in an unlawful detainer case information is on the reverse (complete ite		ASSISTANT OF	UNLAWFUL	DETAINER ASSI	STANT
Date:	1111 <i>4)</i> .				
Date.					
	•				
(TYPE OR PRINT NAME)		(SIGNATURE	OF PLAINTIFF OR A	TTORNEY FOR PLAINTIF	-F)
(n) = ·					
(1) Default entered as red		an).			
(2) Default NOT entered a	as requested (state reas)(I)(.			
USE ONLY					
	Clerk	by			, Deputy

(Continued on reverse)

	SHORT TITLE:	CASE NUMBER:
L		
<u> </u>		
	LEGAL DOCUMENT ASSISTANT OR UNLAWFUL DETAINER ASSISTANT (Bus. & P document assistant or unlawful detainer assistant did did not for assistance with this form. (If declarant has received any help or advice for pay from a legassistant, state):	or compensation give advice or
	a. Assistant's name:b.c. Street address, city, and ZIP:	. Telephone No.:
5.	d. County of registration: e. Registration No.: e. Expires on (date) DECLARATION UNDER CODE OF CIVIL PROCEDURE SECTION 585.5 (Require Proc., § 585(a)) This action a. is is is not on a contract or installment sale for goods or services subject to the process of the process	et to Civ. Code, § 1801 et seq. (Unruh Act).
6.	b. is is not on a conditional sales contract subject to Civ. Code, § 2981 and Finance Act). c. is is not on an obligation for goods, services, loans, or extensions of DECLARATION OF MAILING (Code Civ. Proc., § 587) A copy of this Request for Entry a. not mailed to the following defendants whose addresses are unknown to plain	credit subject to Code Civ. Proc., § 395(b). y of Default was
	b. mailed first-class, postage prepaid, in a sealed envelope addressed to each de each defendant's last known address as follows:	fendant's attorney of record or, if none, to
		and addresses shown on the envelopes):
I de Dat	eclare under penalty of perjury under the laws of the State of California that the foregoing te:	items 4, 5, and 6 are true and correct.
		items 4, 5, and 6 are true and correct. (SIGNATURE OF DECLARANT)
Dat	(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)
	te:	(SIGNATURE OF DECLARANT) ents are as follows (Code Civ. Proc., §
7.	MEMORANDUM OF COSTS (Required if judgment requested) Costs and disburseme 1033.5): a. Clerk's filing fees \$ b. Process server's fees \$ c. Other (specify): \$ d. \$ e. TOTAL \$ f. Costs and disbursements are waived. g. I am the attorney, agent, or party who claims these costs. To the best of my knowledge correct and these costs were necessarily incurred in this case.	(SIGNATURE OF DECLARANT) ents are as follows (Code Civ. Proc., § ge and belief this memorandum of costs is
7.	MEMORANDUM OF COSTS (Required if judgment requested) Costs and disburseme 1033.5): a. Clerk's filing fees \$ b. Process server's fees \$ c. Other (specify): \$ d. \$ e. TOTAL \$ f. Costs and disbursements are waived. g. I am the attorney, agent, or party who claims these costs. To the best of my knowledge correct and these costs were necessarily incurred in this case.	(SIGNATURE OF DECLARANT) ents are as follows (Code Civ. Proc., § ge and belief this memorandum of costs is
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7.	MEMORANDUM OF COSTS (Required if judgment requested) Costs and disburseme 1033.5): a. Clerk's filing fees	(SIGNATURE OF DECLARANT) ge and belief this memorandum of costs is is true and correct. (SIGNATURE OF DECLARANT) dant named in item 1c of the application is to Civil Relief Act of 1940 (50 U.S.C. Appen.